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Washington, DC 20231  
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Bib Data Sheet

CONFIRMATION NO. 9064

<b>SERIAL NUMBER</b> 09/922,885	<b>FILING DATE</b> 08/06/2001 <b>RULE</b>	<b>CLASS</b> 375	<b>GROUP ART UNIT</b> 2634	<b>ATTORNEY DOCKET NO.</b> 56115534-121624	
<b>APPLICANTS</b> Rajiv Laroia, Basking Ridge, NJ; Junyi Li, Bedminster, NJ; Sundeep Rangan, Hoboken, NJ; Hemanth T. Sampath, Bethesda, MD;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/13/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 22046					
<b>TITLE</b> Synchronization of a pilot assisted channel estimation orthogonal frequency division multiplexing system					
<b>FILING FEE RECEIVED</b> 1100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		



## UNITED STATES PATENT AND TRADEMARK OFFICE

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<b>SERIAL NUMBER</b> 09/922,885	<b>FILING DATE</b> 08/06/2001 <b>RULE</b>	<b>CLASS</b> 370	<b>GROUP ART UNIT</b> 2661	<b>ATTORNEY DOCKET NO.</b> 56115534-121624	
<b>APPLICANTS</b> Rajiv Laroia, Basking Ridge, NJ; Junyi Li, Bedminster, NJ; Sundeep Rangan, Hoboken, NJ; Hemanth T. Sampath, Bethesda, MD;					
<b>** CONTINUING DATA *****</b>					
<b>** FOREIGN APPLICATIONS *****</b>					
<b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b> <b>** 09/13/2001</b>					
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged _____ Examiner's Signature _____ Initials _____		<b>STATE OR COUNTRY</b> NJ	<b>SHEETS DRAWING</b> 6	<b>TOTAL CLAIMS</b> 30	<b>INDEPENDENT CLAIMS</b> 4
<b>ADDRESS</b> 26453					
<b>TITLE</b> Synchronization of a pilot assisted channel estimation orthogonal frequency division multiplexing system					
<b>FILING FEE RECEIVED</b> 1100	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit		